

To: Members, Appropriations Committee
From: Sheila B. Amdur, Interim President/CEO
Connecticut Community Providers Association
Re: Governor's proposed Medicaid budget for the biennium
Date: February 22, 2013

Our testimony is directed to the cuts the Governor is proposing in the DSS budget for Medicaid. We find it difficult to comprehend many of the proposed cuts, given that with the implementation of the Affordable Care Act, approximately 50,000 more people will be eligible for Medicaid. Our state has not addressed the serious access issues that will occur with both the expansion of Medicaid and the addition of over 100,000 persons who will be able to access insurance from the Health Insurance Exchange.

- Proposed cuts to behavioral health services under Medicaid include a restructuring of behavioral health reimbursement--\$4.1M reduction in FY 14 and \$5.1M reduction in FY 15. DSS has been given "latitude" to work with DMHAS and DCF about where these cuts will be taken.
- At the same time, the Governor proposed slashing the Grant accounts for Mental Health and for Substance Abuse services in the DMHAS budget, reducing outpatient services by approximately 90% by FY15, with the presumption that everyone eligible for Medicaid will enroll immediately and that all the costs of care provided for outpatient and partially Medicaid billable services will be covered. We will provide committee members next week with a summary of the extensive clinical and clinical support costs that are NOT covered by fee for service payments. At a minimum, we recommend a rejection of the cuts to the DMHAS budget, and a cost analysis of outpatient service provision and the rates that are needed to allow access to mental health and substance use treatment for those who are in need. A bill has been raised by the Human Services Committee that will examine access and outcomes under the ACA Medicaid expansion and will take into consideration this issue.
- The completion of the behavioral health "trifecta" of reductions and lack of transparency is the proposal to eliminate the Behavioral Health Partnership Oversight Council, which this General Assembly initiated to assure we would not have the debacle previously experienced under managed care that almost wiped out behavioral health services and transferred huge liabilities to the state. The Oversight Council has been highly successful working with DMHAS, DCF, and DSS to continue to develop a system of care for the children and adults who need behavioral health treatment and to develop sustainable evidence based treatment programs.

I do not understand at a time in which the General Assembly and the Governor are examining how we reduce stigma, increase early intervention and access to treatment, and assure that there will be someone available to an individual or family in crisis that we also severely reduce the funding of services.

Lastly, I must also note that the \$22 million cut that DDS providers will have to absorb next year, also means a loss to the state of approximately \$11 million in federal revenue. The lack of consideration to how the state should maximize funding of its service system to its fragile and vulnerable citizens and perhaps look to cut other costs in the DDS infrastructure is also difficult to fathom.

Thank you for your consideration.

CCPA

35 Cold Springs Rd., Suite 522, Rocky Hill, CT 06067-3165
(P)860-257-7909 • (F)860-257-7777
www.ccpa-inc.org

"We Are A Community – Health, Safety, Wellbeing"

We Are The Safety Net

Caring for Connecticut

Mental Health
Services

Developmental
Disabilities
Services

Substance Abuse
Services

Safety net services keeping Connecticut healthy and productive.

500,000+ 192,134 509

People Nonprofit Community-
based providers serve each year

Employees in Nonprofit
sector in CT

Human Service Nonprofits in CT
provide government services¹

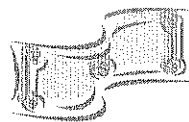
CURRENT AVERAGE WAGES

Average hourly wages at private nonprofit
providers²

Employment/Day Services Worker	\$14.67
Voc Rehab Counselor	\$18.83
Employment Specialist	\$16.73
Job Coach	\$14.60
Direct Care Staff (at 24-hour site)	\$14.50
Direct Care Staff (not 24-hour site)	\$14.79
Sleeping Staff (3rd Shift)	\$12.98
Awake Staff (3rd Shift)	\$14.21

Hourly wage needed to
support Basic Economic
Security for workers³

With employment-based
benefits



1 Worker with no dependents must earn	\$17.61
1 Worker with 1 infant must earn	\$27.19
2 Workers with 1 pre-schooler and 1 school-age child each must earn	\$19.61

HUSKY

22 Nonprofit
employers with
the highest HUSKY
A enrollment among their
employees and employees' kids.⁴

500 employees on HUSKY ⁵
2790 employee kids on HUSKY ⁶
4550 TOTAL employees ⁷
\$7,848,133 Costs to the State ⁸

THE
INFLOX
↓

50,000+

People who will become
Medicaid-eligible
January 1, 2014

33%

Uninsured,
non-elderly adults
w/Chronic
Conditions⁹

THE
INFLOX
↓

COSTS TO THE STATE

STATE-RUN

PRIVATE

25% of DDS clients served in
state settings

\$313,533

Annual per client cost for
FY 2010 at public CLA¹

75% of DDS clients served in privately
funded settings

\$124,443

Annual per client cost for
FY 2010 at private CLA¹

50%

Costs in Private DD facilities
compared to Public DD facilities²

17%

Costs in Private DD facilities
compared to Public DD facilities²

STRESS POINT

Consumer Price Index Increase FY 2009 through FY 2012 = 7.3%
Provider Cost-of-Living Increase FY 2009 through FY 2012 = 0³

CHALLENGES

77% Reporting that
payments on government
contracts do not cover
full cost of contracted
services⁴

0 Increase in funding for
private ICF/MRs and CLAs
FY 2001 to FY 2010⁵

66.27% Providers
with liquidity ratios that indicate
they may have difficulty meeting
short-term obligations⁶

73% Nonprofits with
budgets of \$1 million or more
with deficits in 2009⁷

43% Nonprofits with
deficits in 2009⁸

34.95% Nonprofits
with recommended operating
reserve ratio⁹

- NOTES**
- 1 = Urban Institute
 - 2 = Governor's Nonprofit Cabinet Report 2012
 - 3 = Permanent Commission on the Status of Women – Basic Economic Security Tables
 - 4 = Legislative Program Review and Investigations Committee Study 2011
 - 5 = CT DOL
 - 6 = US DOL
 - 7 = Kaiser FF
 - 8 = OLR
 - 9 = Community Providers Association
 - 10 = CT Voices for Children

design | farcesnewman.com